

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

All America PAC

ADDRESS (number and street) 607 14th Street, NW, Suite 800

Check if different than previously reported. (ACC)

Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00344788

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on 11 07 2006 in the State of DC

5. Covering Period 10 19 2006 through 11 27 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jerry Howe, Jr.

Signature of Treasurer Electronically Filed by Jerry Howe, Jr. Date 01 31 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
All America PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		819652.36
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	601720.42									
(c) Total Receipts (from Line 19) .....	114507.72	1676667.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	716228.14	2496320.27								
7. Total Disbursements (from Line 31) .....	269054.04	2049146.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	447174.10	447174.10								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
All America PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	102742.77	1439598.84
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1085.00	12748.59
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	103827.77	1452347.43
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	9000.00	162000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	112827.77	1614347.43
12. Transfers From Affiliated/Other Party Committees .....	0.00	27312.83
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	9429.08
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1679.95	25578.57
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	114507.72	1676667.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	114507.72	1676667.91

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	235568.26	1731901.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	235568.26	1731901.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	657.47
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4100.00	59882.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	5500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	8000.00
29. Other Disbursements.....	29385.78	248705.53
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	269054.04	2049146.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	269054.04	2049146.17

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	112827.77	1614347.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	8000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	112827.77	1606347.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	235568.26	1731901.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	9429.08
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	235568.26	1722472.09

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 161
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> William Arceneaux		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 320 3rd St Ste 104		<b>Transaction ID:</b> C7524430	
City State Zip Code Baton Rouge LA 70801-1311	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Carolyn F. Belfer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 767 Fifth Avenue		<b>Transaction ID:</b> C8288612	
City State Zip Code New York NY 10153	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	<b>[MEMO ITEM]</b> Earmarked for Montana Senate Victory 2006	

Full Name (Last, First, Middle Initial) <b>C.</b> George P Broadbent		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 201 N Illinois St Ste 2300		<b>Transaction ID:</b> C7521263	
City State Zip Code Indianapolis IN 46204-4240	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Broadbent Company	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Mitchell H Caplan</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6	
Mailing Address 6910 Hillmead Rd		<b>Transaction ID: C7524519</b>	
City State Zip Code Bethesda MD 20817-3028	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer E*Trade Financial Corporation	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Cliff Chenfeld</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 255 W 84th St		<b>Transaction ID: C8289678</b>	
City State Zip Code New York NY 10024-4321	Amount of Each Receipt this Period 640.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Razor & Tie	Occupation Co-Founder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00		
* In-Kind: Catering			

Full Name (Last, First, Middle Initial) <b>C. Russell J. Cohen</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 125 Catalina Drive		<b>Transaction ID: C8288577</b>	
City State Zip Code DeBary FL 32713	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Longwood Police Department	Occupation Detective		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
<b>[MEMO ITEM]</b> Earmarked for Democratic Senatorial Campaign Committee			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5640.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Steven A Cohen

Mailing Address 72 Cummings Point Rd

City State Zip Code  
Stamford CT 06902-7912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SAC Capital Advisors Investment Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 6

**Transaction ID: C7524431**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Charles Fuller Cowles

Mailing Address 29615 Unity Ave

City State Zip Code  
Shafer MN 55074-9660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self employed Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 2 / 2 0 0 6

**Transaction ID: C7528271**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
R. Todd Cronan

Mailing Address 8 Central Street

City State Zip Code  
Winchester MA 01890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Goodwin Procter Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

**Transaction ID: C8288575**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 161
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Oscar A David		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address 1045 Dinsmore Rd		<b>Transaction ID:</b> C7528270	
City State Zip Code Winnetka IL 60093-2009	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Winston & Strawn	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> John D Diekman		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6	
Mailing Address 140 Catalpa Dr		<b>Transaction ID:</b> C7526137	
City State Zip Code Atherton CA 94027-2104	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer 5AM Ventures	Occupation Venture Capitalist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Anthony J. Dinovi		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 3 Ravine Rd		<b>Transaction ID:</b> C7521262	
City State Zip Code Wellesley MA 02481-1426	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Thomasd H Lee Partner LP	Occupation Private Equity Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Priscilla Duncan		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 3375 Gilmer Ave		<b>Transaction ID:</b> C7522907	
City State Zip Code Montgomery AL 36105-1716	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Richard Earley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6	
Mailing Address 871 Deerpath Ct		<b>Transaction ID:</b> C7518109	
City State Zip Code Wheaton IL 60187-8157	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Arxan Technologies	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Michael Edwards		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 336 Commercial St		<b>Transaction ID:</b> C7521264	
City State Zip Code Boston MA 02109-1123	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self employed	Occupation Tax Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 161
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas Ehrlich		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 181 Walter Hays Dr		<b>Transaction ID:</b> C8288979	
City State Zip Code Palo Alto CA 94303-2924	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Carnegie Foundation for the Advanc	Occupation Senior Scholar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Carol S. Farmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 4569 Midway Toad		<b>Transaction ID:</b> C7521694	
City State Zip Code Midway KY 40347	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Investor/Horse Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Tracy Farmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 4569 Midway Rd		<b>Transaction ID:</b> C7521693	
City State Zip Code Midway KY 40347-9770	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Investor/Horse Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 161
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael M Gamson

Mailing Address 8723 Crescent Gate Ln

City State Zip Code  
Houston TX 77024-7029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Vitol SA Inc Oil Trader

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

**Transaction ID:** C6849759

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
William H. Harris, Jr

Mailing Address 137 Moore Road

City State Zip Code  
Woodside CA 94062-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Private Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

**Transaction ID:** C6847613

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Lacy M Johnson

Mailing Address 4900 Buttonwood Cres

City State Zip Code  
Indianapolis IN 46228-2321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Indiana Finance Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 6

**Transaction ID:** C6847608

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Michael Kahn</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 275 Battery St Fl 23 Embarcadero Center West		<b>Transaction ID: C6848432</b>
City State Zip Code San Francisco CA 94111-3305	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Folger Levin & Kahn Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

Full Name (Last, First, Middle Initial) <b>B. Leonard Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 6500 Broxburn Dr		<b>Transaction ID: C7521691</b>
City State Zip Code Bethesda MD 20817-4708	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Sprint Nextel Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Peter A Kidder</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4159 Willmar Dr		<b>Transaction ID: C6847611</b>
City State Zip Code Palo Alto CA 94306-3836	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Silicon Valley Bank Risk Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 161
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Natasha Kurtova		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 6	
Mailing Address 39 Santa Maria Ave		<b>Transaction ID:</b> C7526138	
City State Zip Code Portola Valley CA 94028-7215	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Private Bank	Occupation Senior Scholar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kevin J Leichter		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 6	
Mailing Address 3374 Wrightview Pl		<b>Transaction ID:</b> C8289676	
City State Zip Code Studio City CA 91604-3931	Amount of Each Receipt this Period 385.63		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Christensen, Miller, Fink, et. al.	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.63		
* In-Kind: Catering			

Full Name (Last, First, Middle Initial) <b>C.</b> William G Mays		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 6	
Mailing Address 9644 Nautilus Cir		<b>Transaction ID:</b> C7526136	
City State Zip Code Indianapolis IN 46256-9624	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mays Chemical	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6385.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark E. Nunnally

Mailing Address 61 Farm Street

City State Zip Code  
Dover MA 02030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bain Capital Managing Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

Transaction ID: C7529540

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

**B.** Full Name (Last, First, Middle Initial)  
Judith O'Brien

Mailing Address 1655 Bay Laurel Dr

City State Zip Code  
Menlo Park CA 94025-5809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Incubic Venture Fund Venture Capital

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

Transaction ID: C6847610

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Kenneth W O'Keefe

Mailing Address 400 E Randolph St Apt 40A

City State Zip Code  
Chicago IL 60601-7438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Becken, Pelty, O'Keefe & Co. Private Equity Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

Transaction ID: C6847609

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 16 / 161</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert L Peabody		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 10 St James Ave Fl 16		<b>Transaction ID:</b> C7518110
City State Zip Code Boston MA 02116-3813	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Nystrom Beckman Paris	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Alfred C. Pfeiffer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 619 Mariposa Ave		<b>Transaction ID:</b> C7518108
City State Zip Code Oakland CA 94610-1312	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bingham McCutchen LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Daniel Rull		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 96 Dudley Ln		<b>Transaction ID:</b> C7521692
City State Zip Code Milton MA 02186-4018	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Dean Smith		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 4960 Rockwood Pkwy NW		<b>Transaction ID:</b> C7524521
City State Zip Code Washington DC 20016-3211	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Capital Group Companies	Occupation Investment Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey H. Smulyan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 5101 Green Braes East Drive		<b>Transaction ID:</b> C8288611
City State Zip Code Indianapolis IN 46234	Amount of Each Receipt this Period 20000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Emmis Communications	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

<b>C.</b> Full Name (Last, First, Middle Initial) Connie Spalin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 405 Park Ave		<b>Transaction ID:</b> C8289677
City State Zip Code New York NY 10022-4405	Amount of Each Receipt this Period 3400.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00	

\* In-Kind: Catering

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Steven J. Stogel

Mailing Address 7777 Bonhomme Suite 1210

City State Zip Code  
Saint Louis MO 63105

FEC ID number of contributing federal political committee. **C**

Name of Employer DFC Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

Transaction ID: C8288576

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

**B.** Full Name (Last, First, Middle Initial)  
Peter L. Thoren

Mailing Address 31 Outlook Dr

City State Zip Code  
Darien CT 06820-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Access Industries Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

Transaction ID: C8288980

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Tucker

Mailing Address 302 Prettyman Dr Apt 11305

City State Zip Code  
Rockville MD 20850-7714

FEC ID number of contributing federal political committee. **C**

Name of Employer Akzo Nobel, Inc. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 0 / 2 0 0 6

Transaction ID: C7524586

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Dan Webb		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 35 W Wacker Dr #4600		<b>Transaction ID:</b> C7518113
City State Zip Code Chicago IL 60601-1723	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Winston & Strawn	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Molly E Weeks		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 2 Carberry Ln		<b>Transaction ID:</b> C7519249
City State Zip Code Milton MA 02186-2351	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self employed	Occupation Fitness Program Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey C. Wolk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 202 Commonwealth Avenue Apt. 1		<b>Transaction ID:</b> C8288578
City State Zip Code Boston MA 02116	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Cross Country Group	Occupation Co-President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 161
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Caroline Wu		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1301 David St Apt 207		Transaction ID: C6847612
City State Zip Code San Mateo CA 94403-1911	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation DLA Piper US LLC Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Timothy F Wuliger		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 20 Basswood Ln		Transaction ID: C7524520
City State Zip Code Moreland Hills OH 44022-1377	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Mallard Investments Inc President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Kathryn B. Zukerman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 150 Columbus Ave		Transaction ID: C7524243
City State Zip Code New York NY 10023-5963	Amount of Each Receipt this Period 267.14	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation BTIG Investment broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2140.64	

\* In-Kind: Catering

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5517.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	102742.77

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 161  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Barnes and Thornburg PAC

Mailing Address 11 S. Meridian Street

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 6

**Transaction ID:** C8288579

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Earmarked for Democratic Senatorial Campaign Committee

**B.** Full Name (Last, First, Middle Initial)  
Machinists Non Partisan Political League

Mailing Address 9000 Machinists Place

City State Zip Code  
Upper Marlboro MD 20772-2675

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

**Transaction ID:** C7518112

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mortgage Bankers Association PAC

Mailing Address 1919 Pennsylvania Avenue, N.W.  
8th Floor

City State Zip Code  
Washington DC 20006-3404

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6

**Transaction ID:** C7518111

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00

**TOTAL** This Period (last page this line number only) ..... ► 9000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 161  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 6  
Transaction ID: C8288928  
Amount of Each Receipt this Period  
0.14  
\* Interest Income

**B.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 6  
Transaction ID: C8288929  
Amount of Each Receipt this Period  
83.85  
\* Interest Income

**C.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 6  
Transaction ID: C8288930  
Amount of Each Receipt this Period  
191.35  
\* Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.34**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 161  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 6  
Transaction ID: C8288931  
Amount of Each Receipt this Period  
86.28  
\* Interest Income

**B.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 6  
Transaction ID: C8288932  
Amount of Each Receipt this Period  
318.08  
\* Dividend Income

**C.** Full Name (Last, First, Middle Initial)  
Bear Stearns & Company, Inc.  
Mailing Address Three First National Plaza  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10071.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 6  
Transaction ID: C8288933  
Amount of Each Receipt this Period  
131.46  
\* Dividend Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **535.82**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 161  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) A. National Bank of Indianapolis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Transaction ID: C8288617
City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 1.01	
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15506.89	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. National Bank of Indianapolis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Transaction ID: C8288618
City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 658.30	
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15506.89	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. National Bank of Indianapolis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Transaction ID: C8288619
City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 209.48	
FEC ID number of contributing federal political committee. C		* Interest Income
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15506.89	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	868.79
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1679.95



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Ryan Alexander</b>		<b>Transaction ID:</b> D132698 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 398.89
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement Reimbursement - Travel Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ryan Alexander</b>		<b>Transaction ID:</b> D134767 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 817.29
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement Payroll Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ryan Alexander</b>		<b>Transaction ID:</b> D134768 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 1002.66
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement Payroll Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2218.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 161

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Ryan Alexander</b>		<b>Transaction ID: D134888</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 28.04
City Silver Spring      State MD      Zip Code 20910	Category/ Type	
Purpose of Disbursement Reimbursement-Office Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ryan Alexander</b>		<b>Transaction ID: D134949</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 357.39
City Silver Spring      State MD      Zip Code 20910	Category/ Type	
Purpose of Disbursement Reimbursement - Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ryan Alexander</b>		<b>Transaction ID: D134956</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 8508 16th Street		Amount of Each Disbursement this Period 58.15
City Silver Spring      State MD      Zip Code 20910	Category/ Type	
Purpose of Disbursement Reimbursement-Office Equipment		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>443.58</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> D135324
Mailing Address Suite 0001		Date of Disbursement 11 / 27 / 2006
City Chicago	State IL	Zip Code 60601
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 500.20
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Berkley Caterers</b>		<b>Transaction ID:</b> D134941
Mailing Address 437 Madison Avenue		Date of Disbursement 11 / 08 / 2006
City New York	State NY	Zip Code 10022
Purpose of Disbursement Catering		Amount of Each Disbursement this Period 426.24
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Tyler Bullen</b>		<b>Transaction ID:</b> D134958
Mailing Address 4311 37th St NW		Date of Disbursement 11 / 08 / 2006
City Washington	State DC	Zip Code 20008-3134
Purpose of Disbursement Reimbursement-Telephone/Office Supplies		Amount of Each Disbursement this Period 100.16
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1026.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Tyler Bullen</b>		<b>Transaction ID:</b> D134769 Date of Disbursement 10 / 31 / 2006
Mailing Address 4311 37th St NW		Amount of Each Disbursement this Period 834.07
City Washington State DC Zip Code 20008-3134	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tyler Bullen</b>		<b>Transaction ID:</b> D134770 Date of Disbursement 10 / 31 / 2006
Mailing Address 4311 37th St NW		Amount of Each Disbursement this Period 92.67
City Washington State DC Zip Code 20008-3134	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tyler Bullen</b>		<b>Transaction ID:</b> D134771 Date of Disbursement 11 / 15 / 2006
Mailing Address 4311 37th St NW		Amount of Each Disbursement this Period 834.07
City Washington State DC Zip Code 20008-3134	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1760.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Tyler Bullen</b>		<b>Transaction ID: D134772</b> Date of Disbursement 11 / 15 / 2006	
Mailing Address 4311 37th St NW		Amount of Each Disbursement this Period 92.67	
City Washington State DC Zip Code 20008-3134	Purpose of Disbursement Payroll Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Melissa Caplan</b>		<b>Transaction ID: D134837</b> Date of Disbursement 10 / 27 / 2006	
Mailing Address 2000 N Street, NW, 706		Amount of Each Disbursement this Period 45.48	
City Washington State DC Zip Code 20036	Purpose of Disbursement Reimbursement- Travel/Office Supplies Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. CareFirst Blue Cross Blue Shield</b>		<b>Transaction ID: D134880</b> Date of Disbursement 10 / 23 / 2006	
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 5414.37	
City Washington State DC Zip Code 20065	Purpose of Disbursement Insurance Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5552.52</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 161

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. CareFirst Blue Cross Blue Shield</b>		<b>Transaction ID:</b> D134939 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 5223.23
City Washington State DC Zip Code 20065		
Purpose of Disbursement Insurance Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Amber N. Carrier</b>		<b>Transaction ID:</b> D134845 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 134.22
City Washington State DC Zip Code 20007		
Purpose of Disbursement Reimbursement-Travel/Telephone Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Amber N. Carrier</b>		<b>Transaction ID:</b> D134773 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 287.59
City Washington State DC Zip Code 20007		
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5645.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Amber N. Carrier</b>		<b>Transaction ID: D134774</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 3606 S Street, NW		Amount of Each Disbursement this Period 287.59
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		<b>Transaction ID: D134882</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 881.22
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		<b>Transaction ID: D134953</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 2256.54
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3425.35</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carroll Travel</b>		Transaction ID: D134954 Date of Disbursement 11 / 08 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 2176.08
City Washington State DC Zip Code 20002	Purpose of Disbursement Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Cliff Chenfeld</b>		Transaction ID: D136076 Date of Disbursement 11 / 27 / 2006
Mailing Address 255 W 84th St		Amount of Each Disbursement this Period 640.00
City New York State NY Zip Code 10024-4321	Purpose of Disbursement Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		Transaction ID: D134978 Date of Disbursement 10 / 23 / 2006
Mailing Address P.O. Box 17356		Amount of Each Disbursement this Period 214.43
City Baltimore State MD Zip Code 21297	Purpose of Disbursement Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3030.51
<b>TOTAL</b> This Period (last page this line number only) .....	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		<b>Transaction ID:</b> D134889 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 900 Michigan Avenue, NE		Amount of Each Disbursement this Period 271.35
City Washington State DC Zip Code 20017	Purpose of Disbursement Cable Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		<b>Transaction ID:</b> D132702 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 900 Michigan Avenue, NE		Amount of Each Disbursement this Period 290.28
City Washington State DC Zip Code 20017	Purpose of Disbursement Cable Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cook Group, Inc.</b>		<b>Transaction ID:</b> D132697 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 750 Daniels Way		Amount of Each Disbursement this Period 277.00
City Bloomington State IN Zip Code 47405	Purpose of Disbursement Travel on 11/5/06 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	838.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Cook Group, Inc.</b>		<b>Transaction ID:</b> D134840 Date of Disbursement 10 / 27 / 2006
Mailing Address 750 Daniels Way		Amount of Each Disbursement this Period 609.30
City Bloomington	State IN Zip Code 47405	
Purpose of Disbursement Travel on 9/29/06	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cook Group, Inc.</b>		<b>Transaction ID:</b> D134955 Date of Disbursement 11 / 08 / 2006
Mailing Address 750 Daniels Way		Amount of Each Disbursement this Period 81.50
City Bloomington	State IN Zip Code 47405	
Purpose of Disbursement Travel on 10/25/06	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Dell Marketing L.P.</b>		<b>Transaction ID:</b> D134960 Date of Disbursement 11 / 08 / 2006
Mailing Address One Dell Way		Amount of Each Disbursement this Period 792.07
City Round Rock	State TX Zip Code 78682	
Purpose of Disbursement Office Equipment	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1482.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Dell Marketing L.P.</b>		<b>Transaction ID:</b> D134952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address One Dell Way		Amount of Each Disbursement this Period 7908.81
City Round Rock	State TX	
Zip Code 78682	Category/Type	
Purpose of Disbursement Office Equipment Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Direct Connect</b>		<b>Transaction ID:</b> D134876 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 6028 Fort Hunt Road		Amount of Each Disbursement this Period 282.30
City Alexandria	State VA	
Zip Code 22307	Category/Type	
Purpose of Disbursement Telephone Calls Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sean Downey</b>		<b>Transaction ID:</b> D135341 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 19 Village Drive		Amount of Each Disbursement this Period 1023.31
City East Sandwich	State MA	
Zip Code 02537	Category/Type	
Purpose of Disbursement Payroll Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9214.42
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Michael Edmondson</b>		<b>Transaction ID: D134870</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 1530 E 81st St		Amount of Each Disbursement this Period 750.00
City Indianapolis	State IN Zip Code 46240-2716	
Purpose of Disbursement Political Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fairbanks Maslin Maullin &amp; Associates</b>		<b>Transaction ID: D134874</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 2425 Colorado Avenue Suite 180		Amount of Each Disbursement this Period 4000.00
City Santa Monica	State CA Zip Code 90404	
Purpose of Disbursement Political Consulting Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marc Farinella</b>		<b>Transaction ID: D134963</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 7979 Bradwick Way		Amount of Each Disbursement this Period 8528.25
City Melbourne	State FL Zip Code 32940	
Purpose of Disbursement Political Consulting & Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>13278.25</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Michael Farris</b>		<b>Transaction ID: D134777</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 333.60
City Ducanville	State TX	
Zip Code 75157		
Purpose of Disbursement Payroll		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Michael Farris</b>		<b>Transaction ID: D134778</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 918 Huntington Road		Amount of Each Disbursement this Period 333.60
City Ducanville	State TX	
Zip Code 75157		
Purpose of Disbursement Payroll		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Julie Fitzgerald</b>		<b>Transaction ID: D134779</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 282.37
City Santa Monica	State CA	
Zip Code 90403		
Purpose of Disbursement Payroll		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	949.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Julie Fitzgerald</b>		<b>Transaction ID: D134780</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 282.37
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Julie Fitzgerald</b>		<b>Transaction ID: D134828</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 604.04
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Reimbursement-Travel/Telephone/Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Julie Fitzgerald</b>		<b>Transaction ID: D134962</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 938 4th Street Apt. 107		Amount of Each Disbursement this Period 60.00
City Santa Monica State CA Zip Code 90403	Purpose of Disbursement Reimbursement - Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	946.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Linda Moore Forbes</b>		<b>Transaction ID: D134834</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 5224 Nebraska Avenue, NW		Amount of Each Disbursement this Period 90.00
City Washington State DC Zip Code 20015	Purpose of Disbursement Reimbursement -Travel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Linda Moore Forbes</b>		<b>Transaction ID: D134781</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 5224 Nebraska Avenue, NW		Amount of Each Disbursement this Period 2274.53
City Washington State DC Zip Code 20015	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Linda Moore Forbes</b>		<b>Transaction ID: D134782</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 5224 Nebraska Avenue, NW		Amount of Each Disbursement this Period 2274.53
City Washington State DC Zip Code 20015	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4639.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Stefanie Freeman</b>		<b>Transaction ID: D134783</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 620.24
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Stefanie Freeman</b>		<b>Transaction ID: D134784</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 620.24
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Stefanie Freeman</b>		<b>Transaction ID: D134846</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 2120 16th Street, NW Apt. 311		Amount of Each Disbursement this Period 93.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimbursement-Travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1333.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Lisa George</b>		<b>Transaction ID: D134868</b> Date of Disbursement 10 / 27 / 2006	
Mailing Address 2 Peabody Terrace		Amount of Each Disbursement this Period 514.83	
City Cambridge State MA Zip Code 02138	Purpose of Disbursement Reimbursement-Telephone/Travel/Supplies		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Lisa George</b>		<b>Transaction ID: D134814</b> Date of Disbursement 11 / 15 / 2006	
Mailing Address 2 Peabody Terrace		Amount of Each Disbursement this Period 450.29	
City Cambridge State MA Zip Code 02138	Purpose of Disbursement Payroll		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Lisa George</b>		<b>Transaction ID: D134815</b> Date of Disbursement 10 / 31 / 2006	
Mailing Address 2 Peabody Terrace		Amount of Each Disbursement this Period 450.29	
City Cambridge State MA Zip Code 02138	Purpose of Disbursement Payroll		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1415.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Grassroots Solutions</b>		<b>Transaction ID:</b> D134875 Date of Disbursement
Mailing Address 2929 University Avenue, SE		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>
City Minneapolis	State MN	Zip Code 55414
Purpose of Disbursement Political Consulting Services	<input type="text" value="15000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Christopher Hayler</b>		<b>Transaction ID:</b> D134820 Date of Disbursement
Mailing Address 711 5th Street, SE		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Reimbursement-Telephone/Travel	<input type="text" value="355.52"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Christopher Hayler</b>		<b>Transaction ID:</b> D134785 Date of Disbursement
Mailing Address 711 5th Street, SE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Payroll	<input type="text" value="1749.71"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="17105.23"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Christopher Hayler</b>		<b>Transaction ID: D134786</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 1749.71
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Christopher Hayler</b>		<b>Transaction ID: D132705</b> Date of Disbursement 11 / 20 / 2006
Mailing Address 711 5th Street, SE		Amount of Each Disbursement this Period 600.45
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Travel/Telephone/Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Natalie Jones</b>		<b>Transaction ID: D134787</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 624.24
City Washington State DC Zip Code 20007	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2974.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Natalie Jones</b>		<b>Transaction ID: D134788</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 624.24
City Washington State DC Zip Code 20007	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Natalie Jones</b>		<b>Transaction ID: D134961</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 1325 18th Street, NW Suite 708		Amount of Each Disbursement this Period 289.89
City Washington State DC Zip Code 20007	Purpose of Disbursement Reimbursement-Travel/Telephone/Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Byron L. Kantrow</b>		<b>Transaction ID: D134816</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 230 Central Park South Apt. LLA		Amount of Each Disbursement this Period 636.92
City New York State NY Zip Code 10019	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1551.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Byron L. Kantrow</b>		<b>Transaction ID: D134817</b>	
Mailing Address 230 Central Park South Apt. LLA		Date of Disbursement MM / DD / YYYY 11 / 15 / 2006	
City New York	State NY	Zip Code 10019	Amount of Each Disbursement this Period 636.92
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Byron L. Kantrow</b>		<b>Transaction ID: D134829</b>	
Mailing Address 230 Central Park South Apt. LLA		Date of Disbursement MM / DD / YYYY 10 / 27 / 2006	
City New York	State NY	Zip Code 10019	Amount of Each Disbursement this Period 249.53
Purpose of Disbursement Reimbursement-Telephone/Travel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Jonathan Kott</b>		<b>Transaction ID: D134789</b>	
Mailing Address 1307 South Carolina Avenue, SE		Date of Disbursement MM / DD / YYYY 10 / 31 / 2006	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 823.95
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1710.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jonathan Kott</b>		<b>Transaction ID: D134790</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 1307 South Carolina Avenue, SE		Amount of Each Disbursement this Period 823.95
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jonathan Kott</b>		<b>Transaction ID: D132708</b> Date of Disbursement 11 / 20 / 2006
Mailing Address 1307 South Carolina Avenue, SE		Amount of Each Disbursement this Period 82.11
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement-Travel/Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kevin J Leichter</b>		<b>Transaction ID: D136074</b> Date of Disbursement 10 / 19 / 2006
Mailing Address 3374 Wrightview Pl		Amount of Each Disbursement this Period 385.63  * in-kind received
City Studio City State CA Zip Code 91604-3931	Purpose of Disbursement Catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1291.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Lexis Nexis</b>		<b>Transaction ID:</b> D132703 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address PO Box 933		Amount of Each Disbursement this Period 158.63
City Dayton State OH Zip Code 45401	Purpose of Disbursement Research Tools Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Lexis Nexis</b>		<b>Transaction ID:</b> D134877 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address PO Box 933		Amount of Each Disbursement this Period 158.62
City Dayton State OH Zip Code 45401	Purpose of Disbursement Research Tools Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Jennifer Linker</b>		<b>Transaction ID:</b> D134830 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 1830 Calvert Street, NW		Amount of Each Disbursement this Period 83.45
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimbursement-Telephone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jennifer Linker</b>		<b>Transaction ID: D134791</b> Date of Disbursement 11 / 15 / 2006	
Mailing Address 1830 Calvert Street, NW		Amount of Each Disbursement this Period 2153.64	
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jennifer Linker</b>		<b>Transaction ID: D134792</b> Date of Disbursement 10 / 31 / 2006	
Mailing Address 1830 Calvert Street, NW		Amount of Each Disbursement this Period 2153.64	
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jennifer Linker</b>		<b>Transaction ID: D134977</b> Date of Disbursement 11 / 09 / 2006	
Mailing Address 1830 Calvert Street, NW		Amount of Each Disbursement this Period 101.45	
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimbursement-Travel/Photocopies	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4408.73</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jennifer Linker</b>		<b>Transaction ID:</b> D134937 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1830 Calvert Street, NW		Amount of Each Disbursement this Period 49.05
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimbursement-Travel/Photocopies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. M+R Strategic Services</b>		<b>Transaction ID:</b> D134959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 2120 L Street, NW Suite 600		Amount of Each Disbursement this Period 7998.77
City Washington State DC Zip Code 20037	Purpose of Disbursement Internet Consulting & Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. M+R Strategic Services</b>		<b>Transaction ID:</b> D134835 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 2120 L Street, NW Suite 600		Amount of Each Disbursement this Period 7520.45
City Washington State DC Zip Code 20037	Purpose of Disbursement Internet Consulting & Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15568.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. M+R Strategic Services</b>		<b>Transaction ID: D134841</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 2120 L Street, NW Suite 600		Amount of Each Disbursement this Period 7629.68
City Washington State DC Zip Code 20037	Purpose of Disbursement Internet Consulting & Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Mandarin Oriental</b>		<b>Transaction ID: D134873</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 1330 Maryland Avenue, SW		Amount of Each Disbursement this Period 23333.00
City Washington State DC Zip Code 20024	Purpose of Disbursement Catering & Facility Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Merchant Services</b>		<b>Transaction ID: D135322</b> Date of Disbursement 11 / 02 / 2006
Mailing Address P.O. Box 13305		Amount of Each Disbursement this Period 490.53
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Processing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>31453.21</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Kory Mitchell</b>		<b>Transaction ID: D134957</b> Date of Disbursement 11 / 08 / 2006
Mailing Address 260 Kentucky Avenue, SE		Amount of Each Disbursement this Period 623.77
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Reimbursement - Travel Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kory Mitchell</b>		<b>Transaction ID: D134884</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 260 Kentucky Avenue, SE		Amount of Each Disbursement this Period 839.42
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Reimbursement - Telephone Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kory Mitchell</b>		<b>Transaction ID: D134885</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 260 Kentucky Avenue, SE		Amount of Each Disbursement this Period 202.03
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Reimbursement - Travel Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1665.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Kory Mitchell</b>		<b>Transaction ID: D134886</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 260 Kentucky Avenue, SE		Amount of Each Disbursement this Period 253.60
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Reimbursement - Travel Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kory Mitchell</b>		<b>Transaction ID: D132701</b> Date of Disbursement 11 / 20 / 2006
Mailing Address 260 Kentucky Avenue, SE		Amount of Each Disbursement this Period 206.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Reimbursement - Travel Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. MMI Direct</b>		<b>Transaction ID: D134879</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 120 B Sparks Valley Road		Amount of Each Disbursement this Period 1180.80
City Sparks State MD Zip Code 21152	Category/ Type	
Purpose of Disbursement Direct Mail Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1640.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Nancy Jacobson Consulting, Inc.</b>		<b>Transaction ID: D134832</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 450.82
City Washington State DC Zip Code 20008	Purpose of Disbursement Office Supplies/Telephone/Rent Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Nancy Jacobson Consulting, Inc.</b>		<b>Transaction ID: D134833</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 1730 Connecticut Avenue, N.W. 2nd Floor		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20008	Purpose of Disbursement Fundraising Consulting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. National Bank of Indianapolis</b>		<b>Transaction ID: D134968</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 12.00
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement Bank Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2962.82</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D135320 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 12.00
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Bank Fee Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		<b>Transaction ID:</b> D135323 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 469.14
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Services Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID:</b> D134969 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 11090.11
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Payroll Taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11571.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D134970 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 40.42
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		<b>Transaction ID:</b> D134971 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 104.07
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID:</b> D134972 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 11737.81
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11882.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Pepco</b>		<b>Transaction ID: D134839</b> Date of Disbursement 10 / 27 / 2006	
Mailing Address PO Box 97275		Amount of Each Disbursement this Period 290.87	
City Washington State DC Zip Code 20090	Purpose of Disbursement Utilities	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Perkins Coie LLP</b>		<b>Transaction ID: D134893</b> Date of Disbursement 11 / 08 / 2006	
Mailing Address 1201 Third Avenue 40th Floor		Amount of Each Disbursement this Period 3802.88	
City Seattle State WA Zip Code 98101-3099	Purpose of Disbursement Legal and Accounting Services	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Dan Pfeiffer</b>		<b>Transaction ID: D134793</b> Date of Disbursement 10 / 31 / 2006	
Mailing Address 1117 S Street, NW		Amount of Each Disbursement this Period 2849.69	
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6943.44</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Dan Pfeiffer</b>		<b>Transaction ID:</b> D134794 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1117 S Street, NW		Amount of Each Disbursement this Period 2849.69
City Washington State DC Zip Code 20009	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dan Pfeiffer</b>		<b>Transaction ID:</b> D134951 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1117 S Street, NW		Amount of Each Disbursement this Period 383.40
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimbursement-Travel/Office Equipment Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Quick Messenger Service</b>		<b>Transaction ID:</b> D134942 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 4829 Fairmont Avenue		Amount of Each Disbursement this Period 67.72
City Bethesda State MD Zip Code 20814	Purpose of Disbursement Courier Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3300.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Quick Messenger Service</b>		Transaction ID: D134950 Date of Disbursement
Mailing Address 4829 Fairmont Avenue		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>
City Bethesda	State MD	Zip Code 20814
Purpose of Disbursement Courier Service	<input type="text" value="55.15"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REA Associates, LLC</b>		Transaction ID: D134842 Date of Disbursement
Mailing Address 900 2nd Street, NE Suite 114		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Legal Fees	<input type="text" value="579.30"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REA Associates, LLC</b>		Transaction ID: D134843 Date of Disbursement
Mailing Address 900 2nd Street, NE Suite 114		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Rent	<input type="text" value="2500.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3134.45"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 161

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. REA Associates, LLC</b>		<b>Transaction ID: D132699</b> Date of Disbursement 11 / 20 / 2006
Mailing Address 900 2nd Street, NE Suite 114		Amount of Each Disbursement this Period 2500.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Julie Reeder</b>		<b>Transaction ID: D134831</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 684.80
City Chicago	State IL Zip Code 60611	
Purpose of Disbursement Reimbursement-Travel/Telephone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Julie Reeder</b>		<b>Transaction ID: D134795</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 506.94
City Chicago	State IL Zip Code 60611	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3691.74</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Julie Reeder</b>		<b>Transaction ID:</b> D134796 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 506.94
City Chicago State IL Zip Code 60611		
Purpose of Disbursement Payroll Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Julie Reeder</b>		<b>Transaction ID:</b> D135345 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 750 North Rush Street No. 1405		Amount of Each Disbursement this Period 746.41
City Chicago State IL Zip Code 60611		
Purpose of Disbursement Reimbursement-Travel Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. David Rozmanich</b>		<b>Transaction ID:</b> D134946 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 23 Gleneagles Drive		Amount of Each Disbursement this Period 229.32
City Schererville State IN Zip Code 46375		
Purpose of Disbursement Reimbursement-Mileage Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1482.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Marc D. Schloss</b>		<b>Transaction ID: D134797</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 450 Massachusetts Avenue, NW Apartment 407		Amount of Each Disbursement this Period 533.23
City Washington State DC Zip Code 20001	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Marc D. Schloss</b>		<b>Transaction ID: D134798</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 450 Massachusetts Avenue, NW Apartment 407		Amount of Each Disbursement this Period 533.23
City Washington State DC Zip Code 20001	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Marc D. Schloss</b>		<b>Transaction ID: D134827</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 450 Massachusetts Avenue, NW Apartment 407		Amount of Each Disbursement this Period 64.29
City Washington State DC Zip Code 20001	Purpose of Disbursement Reimbursement-Telephone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1130.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Rozann Skozen</b>		<b>Transaction ID: D134881</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 718 4th Street, SE		Amount of Each Disbursement this Period 24.87
City Washington State DC Zip Code 20510	Purpose of Disbursement Reimbursement-Travel Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rozann Skozen</b>		<b>Transaction ID: D134799</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 718 4th Street, SE		Amount of Each Disbursement this Period 279.59
City Washington State DC Zip Code 20510	Purpose of Disbursement Payroll Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Andrew Smith</b>		<b>Transaction ID: D134801</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 1410 North Scott Street		Amount of Each Disbursement this Period 259.38
City Arlington State VA Zip Code 22209	Purpose of Disbursement Payroll Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	563.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Christopher D. Smith</b>		<b>Transaction ID: D134802</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1487.03
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Christopher D. Smith</b>		<b>Transaction ID: D134803</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 1487.03
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Christopher D. Smith</b>		<b>Transaction ID: D134822</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 5201 Dunstable Lane		Amount of Each Disbursement this Period 738.10
City Alexandria State VA Zip Code 22315	Purpose of Disbursement Reimb-Travel/Office Equipment/Meals	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**3712.16**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Connie Spalin</b>		<b>Transaction ID: D136075</b> Date of Disbursement 10 / 30 / 2006
Mailing Address 405 Park Ave		Amount of Each Disbursement this Period 3400.00
City New York	State NY Zip Code 10022-4405	
Purpose of Disbursement Catering		* in-kind received
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Squier Knapp &amp; Dunn Communications, Inc.</b>		<b>Transaction ID: D134887</b> Date of Disbursement 10 / 23 / 2006
Mailing Address 1818 N Street, NW Suite 450		Amount of Each Disbursement this Period 7556.75
City Washington	State DC Zip Code 20036	
Purpose of Disbursement Communications Consulting & Expenses		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adam Steinhorn</b>		<b>Transaction ID: D134804</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 507 Greenwich Street		Amount of Each Disbursement this Period 385.07
City San Francisco	State CA Zip Code 94133	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>11341.82</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Adam Steinhorn</b>		<b>Transaction ID:</b> D134805 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 507 Greenwich Street		Amount of Each Disbursement this Period 385.07
City San Francisco	State CA Zip Code 94133	
Purpose of Disbursement Payroll		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Sugar</b>		<b>Transaction ID:</b> D134806 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville	State IN Zip Code 46077	
Purpose of Disbursement Payroll		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Thomas Sugar</b>		<b>Transaction ID:</b> D134807 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 4483 Thicket Trace		Amount of Each Disbursement this Period 844.57
City Zionsville	State IN Zip Code 46077	
Purpose of Disbursement Payroll		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2074.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Stephanie C. Sutton</b>		<b>Transaction ID: D134808</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 428.16
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Stephanie C. Sutton</b>		<b>Transaction ID: D134809</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 6711 Velasco Avenue		Amount of Each Disbursement this Period 428.16
City Dallas State TX Zip Code 75214	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Monica Swintz</b>		<b>Transaction ID: D134810</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 2625 North Meridian Apartment 1005		Amount of Each Disbursement this Period 370.19
City Indianapolis State IN Zip Code 46208	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1226.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Monica Swintz</b>		<b>Transaction ID: D134811</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 2625 North Meridian Apartment 1005		Amount of Each Disbursement this Period 370.19
City Indianapolis      State IN      Zip Code 46208		
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>B. The Standard Club</b>		<b>Transaction ID: D134844</b> Date of Disbursement 10 / 27 / 2006
Mailing Address 320 South Plymouth Court		Amount of Each Disbursement this Period 456.31
City Chicago      State IL      Zip Code 60604		
Purpose of Disbursement Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>C. United Parcel Service</b>		<b>Transaction ID: D134836</b> Date of Disbursement 10 / 27 / 2006
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 370.56
City Philadelphia      State PA      Zip Code 19170		
Purpose of Disbursement Shipping		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1197.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. United Parcel Service</b>		<b>Transaction ID:</b> D132707 Date of Disbursement 11 / 20 / 2006
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 179.05
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. United Parcel Service</b>		<b>Transaction ID:</b> D134938 Date of Disbursement 11 / 08 / 2006
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 219.11
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Van Scoyoc Associates</b>		<b>Transaction ID:</b> D134936 Date of Disbursement 11 / 08 / 2006
Mailing Address 101 Constitution Avenue, Suite 600		Amount of Each Disbursement this Period 350.00
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Room Rental & Telephone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	748.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		<b>Transaction ID: D134871</b> Date of Disbursement 10 / 27 / 2006	
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 839.08	
City Baltimore	State MD		Zip Code 21297
Purpose of Disbursement Telephone			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Barry Wagman</b>		<b>Transaction ID: D134940</b> Date of Disbursement 11 / 08 / 2006	
Mailing Address 1907 Shel-Mar Drive		Amount of Each Disbursement this Period 6500.00	
City Ijamsville	State MD		Zip Code 21754
Purpose of Disbursement Financial Consulting Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Wired for Change</b>		<b>Transaction ID: D134943</b> Date of Disbursement 11 / 08 / 2006	
Mailing Address 1700 Connecticut Avenue, NW		Amount of Each Disbursement this Period 700.00	
City Washington	State DC		Zip Code 20009
Purpose of Disbursement Internet Services			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8039.08
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Wired for Change</b>		<b>Transaction ID:</b> D134948 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 1700 Connecticut Avenue, NW		Amount of Each Disbursement this Period 700.00
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement Internet Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Wired for Change</b>		<b>Transaction ID:</b> D134878 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 1700 Connecticut Avenue, NW		Amount of Each Disbursement this Period 450.00
City Washington State DC Zip Code 20009	Category/ Type	
Purpose of Disbursement Internet Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jeff Wurzburg</b>		<b>Transaction ID:</b> D134812 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 320 23rd South Street		Amount of Each Disbursement this Period 988.62
City Arlington State VA Zip Code 22202	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2138.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jeff Wurzburg</b>		<b>Transaction ID: D134813</b> Date of Disbursement 11 / 15 / 2006
Mailing Address 320 23rd South Street		Amount of Each Disbursement this Period 988.62
City Arlington	State VA	
Zip Code 22202	Category/Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jeff Wurzburg</b>		<b>Transaction ID: D134976</b> Date of Disbursement 11 / 09 / 2006
Mailing Address 320 23rd South Street		Amount of Each Disbursement this Period 22.00
City Arlington	State VA	
Zip Code 22202	Category/Type	
Purpose of Disbursement Reimbursement - Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. XO Communications</b>		<b>Transaction ID: D132700</b> Date of Disbursement 11 / 20 / 2006
Mailing Address 14239 Collections Center Drive		Amount of Each Disbursement this Period 1295.15
City Chicago	State IL	
Zip Code 60693	Category/Type	
Purpose of Disbursement Internet Service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2305.77
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Cary B. Young</b>		<b>Transaction ID:</b> D132704 Date of Disbursement 11 / 20 / 2006
Mailing Address 2 Lord Fairfax Drive		Amount of Each Disbursement this Period 169.20
City Fredericksbg State VA Zip Code 22405	Purpose of Disbursement Janitorial Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cary B. Young</b>		<b>Transaction ID:</b> D134883 Date of Disbursement 10 / 23 / 2006
Mailing Address 2 Lord Fairfax Drive		Amount of Each Disbursement this Period 211.50
City Fredericksbg State VA Zip Code 22405	Purpose of Disbursement Janitorial Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Kathryn B. Zukerman</b>		<b>Transaction ID:</b> D131952 Date of Disbursement 10 / 31 / 2006
Mailing Address 150 Columbus Ave		Amount of Each Disbursement this Period 267.14
City New York State NY Zip Code 10023-5963	Purpose of Disbursement Catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	647.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D134896 <b>Date of Disbursement</b> 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 5049.97
City Indianapolis State IN Zip Code 46204	Category/ Type	
Purpose of Disbursement Credit Card Payment, See Below		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		<b>Transaction ID:</b> D136059 <b>Date of Disbursement</b> 10 / 31 / 2006
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 406.55
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Travel		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		<b>Transaction ID:</b> D134910 <b>Date of Disbursement</b> 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Agent Fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5049.97
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carroll Travel</b>		Transaction ID: D134911 Date of Disbursement 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Transaction ID: D134914 Date of Disbursement 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		Transaction ID: D134898 Date of Disbursement 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carroll Travel</b>		Transaction ID: D134903 Date of Disbursement 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Transaction ID: D134919 Date of Disbursement 10 / 31 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Country Inn And Suites</b>		Transaction ID: D134912 Date of Disbursement 10 / 31 / 2006
Mailing Address 2910 S. Main Street		Amount of Each Disbursement this Period 105.28
City Cedar Falls State IA Zip Code 50613	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Executive Inn Evansville</b>		Transaction ID: D134923 Date of Disbursement 10 / 31 / 2006
Mailing Address 600 Walnut Street		Amount of Each Disbursement this Period 132.30  <b>[MEMO ITEM]</b>
City Evansville	State IN Zip Code 47708	
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>B. Inn at Harvard</b>		Transaction ID: D134906 Date of Disbursement 10 / 31 / 2006
Mailing Address 1201 Massachusetts Ave		Amount of Each Disbursement this Period 288.62  <b>[MEMO ITEM]</b>
City Cambridge	State MA Zip Code 02138-5201	
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

Full Name (Last, First, Middle Initial) <b>C. Loews Regency Hotel</b>		Transaction ID: D134909 Date of Disbursement 10 / 31 / 2006
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 476.59  <b>[MEMO ITEM]</b>
City New York	State NY Zip Code 10021	
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

<p><b>A. Monocle</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 107 D Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D134908</p> <p>Date of Disbursement</p> <p>10 / 31 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>61.14</p> <p>[MEMO ITEM]</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>	

<p><b>B. Monocle</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 107 D Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D134897</p> <p>Date of Disbursement</p> <p>10 / 31 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>47.15</p> <p>[MEMO ITEM]</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>	

<p><b>C. Radisson Hotel Manchester</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 700 Elm Street</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D134907</p> <p>Date of Disbursement</p> <p>10 / 31 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>435.50</p> <p>[MEMO ITEM]</p>	
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>	

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>0.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		<b>Transaction ID:</b> D134899 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 119.30
City State Zip Code Glen Burnie MD 21061	[MEMO ITEM]	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		<b>Transaction ID:</b> D134918 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 319.10
City State Zip Code Glen Burnie MD 21061	[MEMO ITEM]	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transamerica Limo</b>		<b>Transaction ID:</b> D134917 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 186.00
City State Zip Code Lodi NJ 07644	[MEMO ITEM]	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Transamerica Limo</b>		<b>Transaction ID:</b> D135786 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 435.00
City Lodi State NJ Zip Code 07644	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Transamerica Limo</b>		<b>Transaction ID:</b> D134900 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 550.00
City Lodi State NJ Zip Code 07644	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transamerica Limo</b>		<b>Transaction ID:</b> D134901 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 435.00
City Lodi State NJ Zip Code 07644	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

**A.** US Airways

Full Name (Last, First, Middle Initial)

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D134915  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

595.30

[MEMO ITEM]

**B.** US Airways

Full Name (Last, First, Middle Initial)

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D134916  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

267.30

[MEMO ITEM]

**C.** US Airways

Full Name (Last, First, Middle Initial)

Mailing Address One Aviation Circle

City Washington State DC Zip Code 20001

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D135388  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

314.30

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		<b>Transaction ID: D134973</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 2768.43
City Indianapolis State IN Zip Code 46204	Category/ Type	
Purpose of Disbursement Credit Card Payment See Below		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Smiths</b>		<b>Transaction ID: D135904</b> Date of Disbursement 10 / 31 / 2006
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 45.42
City Washington State DC Zip Code 20001	Category/ Type	
Purpose of Disbursement Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		<b>Transaction ID: D135755</b> Date of Disbursement 10 / 31 / 2006
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 19.65
City Memphis State TN Zip Code 38101	Category/ Type	
Purpose of Disbursement Shipping		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2768.43
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D135770 Date of Disbursement 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 20.69
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D135771 Date of Disbursement 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 33.64
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Orlando International Airport</b>		<b>Transaction ID:</b> D135769 Date of Disbursement 10 / 31 / 2006
Mailing Address One Airport Blvd		Amount of Each Disbursement this Period 51.00
City Orlando State FL Zip Code 32827	[MEMO ITEM]	
Purpose of Disbursement Parking Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Orlando International Airport</b>		<b>Transaction ID:</b> D135751 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Airport Blvd		Amount of Each Disbursement this Period 45.00
City Orlando State FL Zip Code 32827	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Orlando International Airport</b>		<b>Transaction ID:</b> D135757 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Airport Blvd		Amount of Each Disbursement this Period 51.00
City Orlando State FL Zip Code 32827	[MEMO ITEM]	
Purpose of Disbursement Parking Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Orlando International Airport</b>		<b>Transaction ID:</b> D135761 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Airport Blvd		Amount of Each Disbursement this Period 68.00
City Orlando State FL Zip Code 32827	[MEMO ITEM]	
Purpose of Disbursement Parking Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		<b>Transaction ID:</b> D135767 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 137.10  <b>[MEMO ITEM]</b>
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		<b>Transaction ID:</b> D135754 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 292.10  <b>[MEMO ITEM]</b>
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		<b>Transaction ID:</b> D135763 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 1250 H Street, NW		Amount of Each Disbursement this Period 108.14  <b>[MEMO ITEM]</b>
City State Zip Code Washington DC 20005		
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

**A. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D135764  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

79.30

[MEMO ITEM]

**B. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D135758  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

312.94

[MEMO ITEM]

**C. Staples**

Full Name (Last, First, Middle Initial)

Mailing Address 1250 H Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D135753  
Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

262.48

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		<b>Transaction ID:</b> D135756 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Aviation Circle		Amount of Each Disbursement this Period 316.10
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		<b>Transaction ID:</b> D135762 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Aviation Circle		Amount of Each Disbursement this Period 347.10
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. US Airways</b>		<b>Transaction ID:</b> D135768 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address One Aviation Circle		Amount of Each Disbursement this Period 212.00
City Washington State DC Zip Code 20001	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Transaction ID: D135759 Date of Disbursement 10 / 31 / 2006
Mailing Address 900 Brentwood Avenue, NE		Amount of Each Disbursement this Period 273.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20066		
Purpose of Disbursement Postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. National Bank of Indianapolis</b>		Transaction ID: D134974 Date of Disbursement 10 / 31 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 1387.77
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Credit Card Payment See Below Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Country Inn And Suites</b>		Transaction ID: D135775 Date of Disbursement 10 / 31 / 2006
Mailing Address 2910 S. Main Street		Amount of Each Disbursement this Period 122.08  <b>[MEMO ITEM]</b>
City Cedar Falls State IA Zip Code 50613		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1387.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Four Seasons Hotel</b>		<b>Transaction ID:</b> D135774 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 3960 Las vegas Blvd 5		Amount of Each Disbursement this Period 1221.29
City Las Vegas State NV Zip Code 89119	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Puritan Backroom</b>		<b>Transaction ID:</b> D135772 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 245 Hooksett Road		Amount of Each Disbursement this Period 32.05
City Manchester State NH Zip Code 03104	[MEMO ITEM]	
Purpose of Disbursement Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Puritan Backroom</b>		<b>Transaction ID:</b> D135773 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 245 Hooksett Road		Amount of Each Disbursement this Period 12.35
City Manchester State NH Zip Code 03104	[MEMO ITEM]	
Purpose of Disbursement Meals Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		Transaction ID: D134975 Date of Disbursement 11 / 20 / 2006
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 1604.34
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement Credit Card Payment; See Below	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Transaction ID: D135776 Date of Disbursement 11 / 20 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		Transaction ID: D135785 Date of Disbursement 11 / 20 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 15.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1604.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

<p><b>A. Carroll Travel</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 201 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Agent Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D135779</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Carroll Travel</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 201 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Agent Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D135780</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Executive Inn Evansville</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 600 Walnut Street</p> <p>City Evansville State IN Zip Code 47708</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D135782</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="114.82"/></p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Executive Inn Evansville</b>		<b>Transaction ID:</b> D135783 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 600 Walnut Street		Amount of Each Disbursement this Period 138.94  <b>[MEMO ITEM]</b>
City Evansville State IN Zip Code 47708		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		<b>Transaction ID:</b> D135781 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 40.65  <b>[MEMO ITEM]</b>
City Memphis State TN Zip Code 38101		
Purpose of Disbursement Shipping Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Transamerica Limo</b>		<b>Transaction ID:</b> D135787 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 164 Westervelt Place		Amount of Each Disbursement this Period 307.00  <b>[MEMO ITEM]</b>
City Lodi State NJ Zip Code 07644		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		<b>Transaction ID:</b> D135777 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 359.20  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D135903 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 7355.51  <b>[MEMO ITEM]</b>
City Indianapolis State IN Zip Code 46204		
Purpose of Disbursement Credit Card Payment, See Below Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		<b>Transaction ID:</b> D136041 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address National Airport		Amount of Each Disbursement this Period 829.60  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20000		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7355.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Transaction ID: D136058 Date of Disbursement 10 / 19 / 2006
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 420.76  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Transaction ID: D136053 Date of Disbursement 10 / 19 / 2006	
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 420.00  <b>[MEMO ITEM]</b>	
City Washington State DC Zip Code 20002			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Transaction ID: D136054 Date of Disbursement 10 / 19 / 2006	
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 252.00  <b>[MEMO ITEM]</b>	
City Washington State DC Zip Code 20002			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. B. Smiths</b>		Transaction ID: D135905 Date of Disbursement 10 / 19 / 2006
Mailing Address 50 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 65.28
City Washington State DC Zip Code 20001	Purpose of Disbursement Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Transaction ID: D136048 Date of Disbursement 10 / 19 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Carroll Travel</b>		Transaction ID: D136049 Date of Disbursement 10 / 19 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Agent Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carroll Travel</b>		Transaction ID: D136050 Date of Disbursement 10 / 19 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Carroll Travel</b>		Transaction ID: D136051 Date of Disbursement 10 / 19 / 2006
Mailing Address 201 Massachusetts Avenue, NE		Amount of Each Disbursement this Period 30.00
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Agent Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Expedia.com</b>		Transaction ID: D136056 Date of Disbursement 10 / 19 / 2006
Mailing Address 3150 139th Avenue, S.E.		Amount of Each Disbursement this Period 175.97
City Bellevue State WA Zip Code 98005	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Loews Regency Hotel</b>		<b>Transaction ID:</b> D136057 Date of Disbursement 10 / 19 / 2006
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 1013.27  <b>[MEMO ITEM]</b>
City New York State NY Zip Code 10021		
Purpose of Disbursement Travel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Loews Regency Hotel</b>		<b>Transaction ID:</b> D136055 Date of Disbursement 10 / 19 / 2006	
Mailing Address 540 Park Avenue		Amount of Each Disbursement this Period 750.00  <b>[MEMO ITEM]</b>	
City New York State NY Zip Code 10021			
Purpose of Disbursement Travel Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D136046 Date of Disbursement 10 / 19 / 2006	
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 12.07  <b>[MEMO ITEM]</b>	
City Indianapolis State IN Zip Code 46204			
Purpose of Disbursement Bank Fee Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. National Bank of Indianapolis</b>		<b>Transaction ID:</b> D136047 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 107 North Pennsylvania Street Suite 700		Amount of Each Disbursement this Period 22.80
City Indianapolis State IN Zip Code 46204	[MEMO ITEM]	
Purpose of Disbursement Bank Fee Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Northwest Airlines</b>		<b>Transaction ID:</b> D136038 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 230.21
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Northwest Airlines</b>		<b>Transaction ID:</b> D135906 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Northwest Airlines</b>		<b>Transaction ID:</b> D136042 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 901 15th Street, NW		Amount of Each Disbursement this Period 657.11
City Washington State DC Zip Code 20005	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. Radisson Hotel Manchester</b>		<b>Transaction ID:</b> D136037 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 700 Elm Street		Amount of Each Disbursement this Period 326.26
City Manchester State NH Zip Code 03101	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		<b>Transaction ID:</b> D136044 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 187.10
City Glen Burnie State MD Zip Code 21061	[MEMO ITEM]	
Purpose of Disbursement Travel Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		<b>Transaction ID:</b> D136045 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 327.80  <b>[MEMO ITEM]</b>
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		<b>Transaction ID:</b> D136040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address Baltimore Washington International		Amount of Each Disbursement this Period 658.60  <b>[MEMO ITEM]</b>
City State Zip Code Glen Burnie MD 21061		
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		<b>Transaction ID:</b> D136052 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 1555 K Street, NW		Amount of Each Disbursement this Period 318.60  <b>[MEMO ITEM]</b>
City State Zip Code Washington DC 20002		
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	235231.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carol Shea-Porter For Congress</b>		<b>Transaction ID:</b> D134869 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 459		Amount of Each Disbursement this Period 1000.00
City Rochester State NH Zip Code 03866	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Carol Shea-Porter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134924 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 10000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Earmarked from Mark Nunnally		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134926 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Earmarked from R. Todd Cronan		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 5000.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Earmarked from Steven Stogel Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134930 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 5000.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Earmarked from Russell J. Cohen Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134932 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Earmarked from Jeffrey C. Wolk Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134934 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Earmarked from Barnes & Thornburg PAC Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Democratic Senatorial Campaign Committee</b>		<b>Transaction ID:</b> D134965 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 120 Maryland Avenue, N.E.		Amount of Each Disbursement this Period 20000.00  <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20002		
Purpose of Disbursement Earmarked from Jeffrey Smulyan Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ken Lucas For Congress</b>		<b>Transaction ID:</b> D134895 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 175765		Amount of Each Disbursement this Period 1000.00
City Covington State KY Zip Code 41017		
Purpose of Disbursement Contribution Candidate Name Ken Lucas	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Montana Senate Victory 2006</b>		Transaction ID: D134967 Date of Disbursement
Mailing Address 120 Maryland Avenue, NE		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Earmarked from Carolyn F. Belfer		Amount of Each Disbursement this Period <input type="text" value="2100.00"/>
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Tessa Hafen For Congress</b>		Transaction ID: D134823 Date of Disbursement
Mailing Address P.O. Box 530996		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Henderson	State NV	Zip Code 89053
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="2100.00"/>
Candidate Name Tessa Hafen		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4100.00"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Laurie Harding</b>		<b>Transaction ID: D132787</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 56 Jenkins Road		Amount of Each Disbursement this Period 100.00
City Lebanon State NH Zip Code 03766	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Allan Mayranen for State Representative</b>		<b>Transaction ID: D132857</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 847 Oakhill Road		Amount of Each Disbursement this Period 200.00
City Sanbornville State NH Zip Code 03872	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Angeline A. Kopta</b>		<b>Transaction ID: D132820</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 63 Buckmeadow Road		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03062	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Anne C. Grassie</b>		<b>Transaction ID: D132736</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 9 Central Avenue		Amount of Each Disbursement this Period 100.00	
City Rochester State NH Zip Code 03867	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Anne-Marie Irwin</b>		<b>Transaction ID: D132794</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 10 Highland Drive		Amount of Each Disbursement this Period 100.00	
City Peterborough State NH Zip Code 03458	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Anthony P. Matarazzo</b>		<b>Transaction ID: D132807</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 530 Broad Street		Amount of Each Disbursement this Period 100.00	
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Arthur G. Jillette, Jr.</b>		<b>Transaction ID: D132753</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address P.O. Box 1016		Amount of Each Disbursement this Period 100.00	
City Goshen State NH Zip Code 03752	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Baldwin 'Dom' Domingo</b>		<b>Transaction ID: D132742</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 5 Birch Drive		Amount of Each Disbursement this Period 100.00	
City Dover State NH Zip Code 03820	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Barbara Conner French</b>		<b>Transaction ID: D132829</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 17 Fairview Avenue		Amount of Each Disbursement this Period 100.00	
City Henniker State NH Zip Code 03242	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Barbara Hull Richardson</b>		<b>Transaction ID:</b> D132773 Date of Disbursement 10 / 20 / 2006
Mailing Address 101 Morgan Road		Amount of Each Disbursement this Period 100.00
City Richmond State NH Zip Code 03470	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Barbara Shaw</b>		<b>Transaction ID:</b> D132804 Date of Disbursement 10 / 20 / 2006
Mailing Address 45 Randall Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Baxley for State Representative</b>		<b>Transaction ID:</b> D132874 Date of Disbursement 10 / 22 / 2006
Mailing Address P.O. Box 0067		Amount of Each Disbursement this Period 200.00
City Andover State NH Zip Code 03216	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Benjamin C. Barody</b>		<b>Transaction ID: D132801</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 1175 Bridge Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03104	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bernard Benn</b>		<b>Transaction ID: D132782</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 28 1/2 Rip Road		Amount of Each Disbursement this Period 100.00
City Hanover State NH Zip Code 03755	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bette R. Lasky</b>		<b>Transaction ID: D132821</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 15 Masfield Road		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03062	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Betty B. Hall</b>		<b>Transaction ID: D132796</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 309		Amount of Each Disbursement this Period 100.00
City Brookline State NH Zip Code 03033	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Bob Barry for State Representative</b>		<b>Transaction ID: D132855</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 25 Birch Way		Amount of Each Disbursement this Period 200.00
City New Hampton State NH Zip Code 03256	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Bonnie Mitchell</b>		<b>Transaction ID: D132775</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 7 Parsons Lane		Amount of Each Disbursement this Period 100.00
City Jaffrey State NH Zip Code 03452	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Brenda Ferland</b>		<b>Transaction ID: D132758</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 267 River Road		Amount of Each Disbursement this Period 100.00
City Charlestown State NH Zip Code 03603	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. C. Pennington Brown</b>		<b>Transaction ID: D132849</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 153 Old Hedding Road #40		Amount of Each Disbursement this Period 100.00
City Epping State NH Zip Code 03042	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Candace C. W. Bouchard</b>		<b>Transaction ID: D132840</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 71 Northeast Village Road		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. CareFirst Blue Cross Blue Shield</b>		<b>Transaction ID: D135342</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 269.00
City Washington State DC Zip Code 20065	See Pre-General Report	
Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CareFirst Blue Cross Blue Shield</b>		<b>Transaction ID: D135343</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 134.50
City Washington State DC Zip Code 20065	Category/ Type	
Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CareFirst Blue Cross Blue Shield</b>		<b>Transaction ID: D135344</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 840 First Street, NE		Amount of Each Disbursement this Period 62.77
City Washington State DC Zip Code 20065	Category/ Type	
Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	466.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Carolyn Webber</b>		<b>Transaction ID: D132879</b> Date of Disbursement 10 / 22 / 2006	
Mailing Address P.O. Box 563		Amount of Each Disbursement this Period 200.00	
City Windham State NH Zip Code 03087	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Catherine Mulholland</b>		<b>Transaction ID: D132785</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 134 Gifford Hill Road		Amount of Each Disbursement this Period 100.00	
City Grafton State NH Zip Code 03240	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Charles B. Yeaton</b>		<b>Transaction ID: D132834</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 105 North Road		Amount of Each Disbursement this Period 100.00	
City Epsom State NH Zip Code 03234	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Charles Weed</b>		<b>Transaction ID: D132765</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 28 Damon Court		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Chase for Change</b>		<b>Transaction ID: D132793</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 1097 Bible Hill Road		Amount of Each Disbursement this Period 100.00
City Francestown State NH Zip Code 03043	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Christine C. Hamm</b>		<b>Transaction ID: D132827</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 14 South Road		Amount of Each Disbursement this Period 100.00
City Hopkinton State NH Zip Code 03229	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Christopher Rossetti</b>		<b>Transaction ID: D132880</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 3 Mitchell Pond Road		Amount of Each Disbursement this Period 200.00
City Windham State NH Zip Code 03087	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Christopher Serlin</b>		<b>Transaction ID: D132854</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 89 Sparhawk Street		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Cindy Rosenwald</b>		<b>Transaction ID: D132811</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 101 Wellington Street		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Claire D. Clarke</b>		<b>Transaction ID: D132830</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 437 Daniel Webster Hwy		Amount of Each Disbursement this Period 100.00
City Boscawen	State NH Zip Code 03303	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Claudette R. Jean</b>		<b>Transaction ID: D132818</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 52 Burke Street		Amount of Each Disbursement this Period 100.00
City Nashua	State NH Zip Code 03060	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Ed Butler</b>		<b>Transaction ID: D132856</b> Date of Disbursement 10 / 22 / 2006
Mailing Address Notchland Inn Route 302		Amount of Each Disbursement this Period 200.00
City Harts Location	State NH Zip Code 03812	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Michael A. Mauro</b>		<b>Transaction ID:</b> D134890 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 4325 SW 31st Street		Amount of Each Disbursement this Period 1500.00
City Des Moines State IA Zip Code 50321	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Ruth Hall</b>		<b>Transaction ID:</b> D132858 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 112 Main Street		Amount of Each Disbursement this Period 200.00
City Union State NH Zip Code 03887	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Dana S. Hilliard</b>		<b>Transaction ID:</b> D132737 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 14 Portland Street		Amount of Each Disbursement this Period 100.00
City Somersworth State NH Zip Code 03878	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Daniel Adams Eaton</b>		<b>Transaction ID: D132763</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 1 Shedd Hill Road		Amount of Each Disbursement this Period 100.00
City Stoddard State NH Zip Code 03464	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. David B. Campbell</b>		<b>Transaction ID: D132816</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 10 E. Dunstable Road		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. David Borden for State Representative</b>		<b>Transaction ID: D132883</b> Date of Disbursement 10 / 22 / 2006
Mailing Address P. O. Box 167		Amount of Each Disbursement this Period 200.00
City New Castle State NH Zip Code 03854	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. David E. Cote</b>		<b>Transaction ID: D132814</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 96 West Hollis St.		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. David Essex</b>		<b>Transaction ID: D132791</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 12 N. Main Street		Amount of Each Disbursement this Period 100.00
City Antrim State NH Zip Code 03440	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. David L. Smith</b>		<b>Transaction ID: D132812</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 12 Gettsburg Drive		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

**A. Deb Reynolds For NH State**

Full Name (Last, First, Middle Initial)  
Deb Reynolds For NH State

Transaction ID: D134826  
Date of Disbursement  
10 / 23 / 2006

Mailing Address 607 Tenney Mountain Highway #127

City Plymouth State NH Zip Code 03264

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period  
500.00

**B. Deborah Wheeler for State Representative**

Full Name (Last, First, Middle Initial)  
Deborah Wheeler for State Representative

Transaction ID: D132875  
Date of Disbursement  
10 / 22 / 2006

Mailing Address 38 Bay Street

City Northfield State NH Zip Code 03276

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period  
200.00

**C. Dennis Abbott**

Full Name (Last, First, Middle Initial)  
Dennis Abbott

Transaction ID: D132851  
Date of Disbursement  
10 / 20 / 2006

Mailing Address 199 Ash Swamp Road

City Newmarket State NH Zip Code 03857

Purpose of Disbursement Nonfederal Contribution  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period  
100.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 800.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Derek Owen</b>		<b>Transaction ID:</b> D132828 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 580 Brockway Road		Amount of Each Disbursement this Period 100.00
City Hopkinton State NH Zip Code 03229	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Don Brueggemann</b>		<b>Transaction ID:</b> D132843 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 14 Noyes St.		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Sean Downey</b>		<b>Transaction ID:</b> D134775 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 19 Village Drive		Amount of Each Disbursement this Period 1918.71
City East Sandwich State MA Zip Code 02537	Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2118.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 161

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Sean Downey</b>		<b>Transaction ID: D134776</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 19 Village Drive		Amount of Each Disbursement this Period 895.40	
City East Sandwich State MA Zip Code 02537	Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Earle Goodwin</b>		<b>Transaction ID: D132744</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 34 Arch Street		Amount of Each Disbursement this Period 100.00	
City Dover State NH Zip Code 03820	Purpose of Disbursement Nonfederal Contribution Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Edgar Mears</b>		<b>Transaction ID: D132777</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 243 East Mason		Amount of Each Disbursement this Period 100.00	
City Berlin State NH Zip Code 03570	Purpose of Disbursement Nonfederal Contribution Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1095.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Eileen Flockhart</b>		<b>Transaction ID: D132853</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 62 Park Court		Amount of Each Disbursement this Period 100.00	
City Exeter	State NH	Zip Code 03833	Category/ Type
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Elizabeth D. Blanchard</b>		<b>Transaction ID: D132837</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 61 Washington Street		Amount of Each Disbursement this Period 100.00	
City Penacook	State NH	Zip Code 03303	Category/ Type
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Emma Rous</b>		<b>Transaction ID: D132747</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 64 Adams Point Road		Amount of Each Disbursement this Period 100.00	
City Durham	State NH	Zip Code 03824	Category/ Type
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Eric P. Rochette</b>		<b>Transaction ID: D132808</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 2 Austin Circle		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Evalyn Merrick for State Representative</b>		<b>Transaction ID: D132888</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 27 Blackberry Lane		Amount of Each Disbursement this Period 200.00
City Lancaster State NH Zip Code 03584	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Forest for Representative</b>		<b>Transaction ID: D132871</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 692 Montgomery St.		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03102	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Fran Potter</b>		<b>Transaction ID: D132835</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 38 Little Pond Road		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Francis Davis</b>		<b>Transaction ID: D132876</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 514 Buck Street		Amount of Each Disbursement this Period 200.00
City Pembroke State NH Zip Code 03275	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Francis Sullivan</b>		<b>Transaction ID: D132799</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 14 Watson Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Frank A. Tupper</b>		<b>Transaction ID: D132831</b> Date of Disbursement 10 / 20 / 2006
Mailing Address P.O. Box 92		Amount of Each Disbursement this Period 100.00
City Canterbury State NH Zip Code 03224	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Franklin City Democrats</b>		<b>Transaction ID: D132825</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 211 Carver Street		Amount of Each Disbursement this Period 100.00
City Franklin State NH Zip Code 03235	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Friends of Hackett for Representative</b>		<b>Transaction ID: D132866</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 147 Kennard Road		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03104	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of Jean Jeudy</b>		<b>Transaction ID:</b> D132798 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 134 Calef Road		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Gail Morrison for State Representative</b>		<b>Transaction ID:</b> D132760 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 133		Amount of Each Disbursement this Period 100.00
City Sanbornton State NH Zip Code 03269	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Gene Anderson</b>		<b>Transaction ID:</b> D132788 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 4 Allen Street		Amount of Each Disbursement this Period 100.00
City Lebanon State NH Zip Code 03766	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Gilman Shattuck</b>		<b>Transaction ID:</b> D132792 Date of Disbursement 10 / 20 / 2006
Mailing Address 571 Center Road		Amount of Each Disbursement this Period 100.00
City Hillsborough State NH Zip Code 03244	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Hector M. Valez</b>		<b>Transaction ID:</b> D132800 Date of Disbursement 10 / 20 / 2006
Mailing Address 269 Central Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Henry A. L. Parkhurst</b>		<b>Transaction ID:</b> D132770 Date of Disbursement 10 / 20 / 2006
Mailing Address One Parkhurst Place		Amount of Each Disbursement this Period 100.00
City Winchester State NH Zip Code 03470	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. J. Timothy Dunn</b>		<b>Transaction ID: D132766</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 1 Riverton Street		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Jacqueline Cali-Pitts</b>		<b>Transaction ID: D132730</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 110 Ledgewood Drive		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. James Aguiar</b>		<b>Transaction ID: D132780</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 21 Depot Street		Amount of Each Disbursement this Period 100.00
City Campton State NH Zip Code 03223	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. James F. Powers</b>		<b>Transaction ID:</b> D132731 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 3 Currier's Cove		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. James G. 'Jay' Phinizy</b>		<b>Transaction ID:</b> D132759 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address Box 175		Amount of Each Disbursement this Period 100.00
City Acworth State NH Zip Code 03601	Purpose of Disbursement Nonfederal Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. James R. Splaine</b>		<b>Transaction ID:</b> D132732 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 201 Oriental Gardens		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jane Clemons</b>		<b>Transaction ID: D132817</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 177 Kinsley Street		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Jane E. Beaulieu</b>		<b>Transaction ID: D132806</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 609 Main Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03102	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Janet G. Wall</b>		<b>Transaction ID: D132748</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 4 Pudding Hill Road		Amount of Each Disbursement this Period 100.00
City Madbury State NH Zip Code 03823	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jeff Goley</b>		<b>Transaction ID: D132797</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 1683 River Road		Amount of Each Disbursement this Period 100.00	
City Manchester State NH Zip Code 03104	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jennifer M. Brown</b>		<b>Transaction ID: D132743</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 9 Baldwin Way		Amount of Each Disbursement this Period 100.00	
City Dover State NH Zip Code 03820	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jennifer Mitchell</b>		<b>Transaction ID: D132863</b> Date of Disbursement 10 / 22 / 2006	
Mailing Address P.O. Box 476		Amount of Each Disbursement this Period 200.00	
City Holderness State NH Zip Code 03245	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Jessie L. Osborne</b>		<b>Transaction ID: D132844</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 110 Fisk Road		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Joan H. Schulze</b>		<b>Transaction ID: D132822</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 11 Spencer Drive		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03062	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. John DeJoie</b>		<b>Transaction ID: D132841</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 481 Shaker Road		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. John R. Cloutier</b>		<b>Transaction ID: D132756</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 10 Spruce Avenue Apartment 1		Amount of Each Disbursement this Period 100.00
City Claremont State NH Zip Code 07343	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. John Robinson</b>		<b>Transaction ID: D132848</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 13 Elwood Road		Amount of Each Disbursement this Period 100.00
City Londonderry State NH Zip Code 03053	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Joseph 'Joe' Miller</b>		<b>Transaction ID: D132749</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 13 Mill Road		Amount of Each Disbursement this Period 100.00
City Durham State NH Zip Code 03824	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Joy K. Tilton</b>		<b>Transaction ID: D132832</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 4 Hill Street		Amount of Each Disbursement this Period 100.00
City Northfield State NH Zip Code 03276	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Judith Spang</b>		<b>Transaction ID: D132750</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 55 Wiswall Road		Amount of Each Disbursement this Period 100.00
City Durham State NH Zip Code 03824	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Kimberly C. Shaw</b>		<b>Transaction ID: D132823</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 14 Sweet William Circle		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03062	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Kimberly Casey</b>		<b>Transaction ID:</b> D132850 Date of Disbursement 10 / 20 / 2006
Mailing Address 109 Giles Road		Amount of Each Disbursement this Period 100.00
City East Kingston State NH Zip Code 03827	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Kris E. Roberts</b>		<b>Transaction ID:</b> D132767 Date of Disbursement 10 / 20 / 2006
Mailing Address 58 Grove Street		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Larry Brown</b>		<b>Transaction ID:</b> D132740 Date of Disbursement 10 / 20 / 2006
Mailing Address 1362 White Mountain Highway		Amount of Each Disbursement this Period 100.00
City Milton State NH Zip Code 03851	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Larry Converse</b>		<b>Transaction ID: D132757</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 7 Clover Street		Amount of Each Disbursement this Period 100.00
City Claremont State NH Zip Code 03743	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Laura C. Pantelakos</b>		<b>Transaction ID: D132733</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 528 Dennett Street		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Lee Hammond</b>		<b>Transaction ID: D132789</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 57 US Route 4A		Amount of Each Disbursement this Period 100.00
City Lebanon State NH Zip Code 03766	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 161

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Linda T. Foster</b>		<b>Transaction ID:</b> D132795 Date of Disbursement 10 / 20 / 2006
Mailing Address 3 Blood Road		Amount of Each Disbursement this Period 100.00
City Mont Vernon State NH Zip Code 03057	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Long for Representative</b>		<b>Transaction ID:</b> D132867 Date of Disbursement 10 / 22 / 2006
Mailing Address 555 Canal Street #1506		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Lori A. Movsesian</b>		<b>Transaction ID:</b> D132813 Date of Disbursement 10 / 20 / 2006
Mailing Address 15 Berkeley Street		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Marcia Moody</b>		<b>Transaction ID:</b> D132852 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 1 Maple Street		Amount of Each Disbursement this Period 100.00
City Newmarket State NH Zip Code 03857	Category/ Type	
Purpose of Disbursement Nonfederal Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Marjorie Smith</b>		<b>Transaction ID:</b> D132751 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 136		Amount of Each Disbursement this Period 100.00
City Durham State NH Zip Code 03824	Category/ Type	
Purpose of Disbursement Nonfederal Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Martha Stroup McLeod</b>		<b>Transaction ID:</b> D132779 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 348 Wells Road		Amount of Each Disbursement this Period 100.00
City Franconia State NH Zip Code 03580	Category/ Type	
Purpose of Disbursement Nonfederal Contribution Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Martineau for Representative</b>		<b>Transaction ID:</b> D132870 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 48 Oakdale Avenue		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Mary Beth Walz</b>		<b>Transaction ID:</b> D132846 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 25 One Stack Drive		Amount of Each Disbursement this Period 100.00
City Bow State NH Zip Code 03304	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Mary Gorman</b>		<b>Transaction ID:</b> D132815 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 44 1/2 Amherst Street		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03064	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Mary Jane Wallner</b>		<b>Transaction ID: D132845</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 4 Chestnut Pasture Road		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Mary R. Cooney</b>		<b>Transaction ID: D132781</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 78 Highland Street		Amount of Each Disbursement this Period 100.00
City Plymouth State NH Zip Code 03264	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Mary Stuart Gile</b>		<b>Transaction ID: D132838</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 35 Penacook Street		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Maurice L. Pilotte</b>		<b>Transaction ID:</b> D132805 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 98 Lancaster Avenue		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Melanie Bell</b>		<b>Transaction ID:</b> D132886 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 653		Amount of Each Disbursement this Period 200.00
City Newbury State NH Zip Code 03255	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Melanie Levesque</b>		<b>Transaction ID:</b> D132865 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 2 McDaniels Drive		Amount of Each Disbursement this Period 200.00
City Brookline State NH Zip Code 03033	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Michael S. Rollo</b>		Transaction ID: D132738 Date of Disbursement 10 / 20 / 2006	
Mailing Address 23 Heritage Drive		Amount of Each Disbursement this Period 100.00	
City Rollinsford State NH Zip Code 03869	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mike Brunelle For State Representative</b>		Transaction ID: D134825 Date of Disbursement 10 / 23 / 2006	
Mailing Address 148 Kimball Street		Amount of Each Disbursement this Period 300.00	
City Manchester State NH Zip Code 03102	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Molly Kelly for State Senate</b>		Transaction ID: D134824 Date of Disbursement 10 / 23 / 2006	
Mailing Address PO Box 1475		Amount of Each Disbursement this Period 1000.00	
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Naida Kaen</b>		<b>Transaction ID: D132752</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 22 Toon Lane		Amount of Each Disbursement this Period 100.00
City Lee State NH Zip Code 03824	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. O'Brien for Representative</b>		<b>Transaction ID: D132873</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 4 Woodfield St.		Amount of Each Disbursement this Period 200.00
City Nashua State NH Zip Code 03062	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. O'Brien for Secretary of Agriculture</b>		<b>Transaction ID: D134872</b> Date of Disbursement 11 / 01 / 2006
Mailing Address P O Box 94		Amount of Each Disbursement this Period 1000.00
City Atlantic State IA Zip Code 50002	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Otto for State Representative</b>		<b>Transaction ID:</b> D132884 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 124 Washington Street		Amount of Each Disbursement this Period 200.00
City Rye State NH Zip Code 03870	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Patricia McMahon</b>		<b>Transaction ID:</b> D132826 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address Box 95		Amount of Each Disbursement this Period 100.00
City North Sutton State NH Zip Code 03260	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Patrick Garrity</b>		<b>Transaction ID:</b> D132802 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 82 Norris Street		Amount of Each Disbursement this Period 100.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Paul Hackel</b>		<b>Transaction ID: D132872</b> Date of Disbursement 10 / 22 / 2006	
Mailing Address 7 Bellingrath Place		Amount of Each Disbursement this Period 200.00	
City Nashua	State NH	Zip Code 03063	Category/ Type
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Paul Matineau For Executive Council</b>		<b>Transaction ID: D134891</b> Date of Disbursement 10 / 23 / 2006	
Mailing Address 490 River Road #2		Amount of Each Disbursement this Period 1000.00	
City Manchester	State NH	Zip Code 03104	Category/ Type
Purpose of Disbursement Nonfederal Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID: D135339</b> Date of Disbursement 10 / 31 / 2006	
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 787.77	
City Fairfax	State VA	Zip Code 22031	Category/ Type
Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1987.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 161

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D135340 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 3060 Williams Drive		Amount of Each Disbursement this Period 367.63
City Fairfax State VA Zip Code 22031	Category/ Type	
Purpose of Disbursement Nonfed. In-Kind to NH Dem. Senate Caucus		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Pete E. Soloman</b>		<b>Transaction ID:</b> D132786 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 163		Amount of Each Disbursement this Period 100.00
City Canaan State NH Zip Code 03741	Category/ Type	
Purpose of Disbursement Nonfederal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Peter B. Schmidt</b>		<b>Transaction ID:</b> D132741 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 1468		Amount of Each Disbursement this Period 100.00
City Dover State NH Zip Code 03821	Category/ Type	
Purpose of Disbursement Nonfederal Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	567.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Peter E. Franklin</b>		<b>Transaction ID: D132754</b> Date of Disbursement 10 / 20 / 2006
Mailing Address P.O. Box 411		Amount of Each Disbursement this Period 100.00
City Newport State NH Zip Code 03773	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Peter H. Allen</b>		<b>Transaction ID: D132774</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 25 Seaver Road		Amount of Each Disbursement this Period 100.00
City Harrisville State NH Zip Code 03450	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Peter R. Cote</b>		<b>Transaction ID: D132819</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 68 Bowers Street		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03060	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Peter S. Espiefs</b>		<b>Transaction ID:</b> D132768 Date of Disbursement 10 / 20 / 2006
Mailing Address 29 Middle Street		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Philip Preston</b>		<b>Transaction ID:</b> D132864 Date of Disbursement 10 / 22 / 2006
Mailing Address P.O. Box 573		Amount of Each Disbursement this Period 200.00
City Ashland State NH Zip Code 03217	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Redden for State Representative</b>		<b>Transaction ID:</b> D132881 Date of Disbursement 10 / 22 / 2006
Mailing Address 2 Hall Avenue		Amount of Each Disbursement this Period 200.00
City Salem State NH Zip Code 03079	Purpose of Disbursement Nonfederal Contribution Candidate Name <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Reuschel for Representative</b>		<b>Transaction ID:</b> D132869 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 116 South Taylor Street		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Rita Vargas For Scott County Recorder</b>		<b>Transaction ID:</b> D134821 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 2724 LeClaire Street		Amount of Each Disbursement this Period 250.00
City Davenport State IA Zip Code 52803	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Robert Fink</b>		<b>Transaction ID:</b> D132859 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 62 Prospect Street		Amount of Each Disbursement this Period 200.00
City Lancaster State NH Zip Code 03584	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Robert Foose</b>		<b>Transaction ID: D132824</b> Date of Disbursement 10 / 20 / 2006
Mailing Address    Box 1397		Amount of Each Disbursement this Period 100.00
City New London	State    Zip Code NH        03257	
Purpose of Disbursement Nonfederal Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:            District:		

Full Name (Last, First, Middle Initial) <b>B. Robert J. Haley</b>		<b>Transaction ID: D132803</b> Date of Disbursement 10 / 20 / 2006
Mailing Address    147 Beech Street		Amount of Each Disbursement this Period 100.00
City Manchester	State    Zip Code NH        03103	
Purpose of Disbursement Nonfederal Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:            District:		

Full Name (Last, First, Middle Initial) <b>C. Robert L. Theberge</b>		<b>Transaction ID: D132778</b> Date of Disbursement 10 / 20 / 2006
Mailing Address    P.O. Box 271		Amount of Each Disbursement this Period 100.00
City Berlin	State    Zip Code NH        03570	
Purpose of Disbursement Nonfederal Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:            District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Robert Matheson</b>		<b>Transaction ID: D132861</b> Date of Disbursement 10 / 22 / 2006
Mailing Address P.O. Box 252		Amount of Each Disbursement this Period 200.00
City North Woodstock	State NH Zip Code 03262	
Purpose of Disbursement Nonfederal Contribution		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robert Williams</b>		<b>Transaction ID: D132839</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 149 East Side Drive		Amount of Each Disbursement this Period 100.00
City Concord	State NH Zip Code 03301	
Purpose of Disbursement Nonfederal Contribution		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Roger R. Berube</b>		<b>Transaction ID: D132739</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 15 Stackpole Road		Amount of Each Disbursement this Period 100.00
City Somersworth	State NH Zip Code 03878	
Purpose of Disbursement Nonfederal Contribution		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Roland P. Hofemann</b>		<b>Transaction ID: D132745</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 18 Wellington Avenue		Amount of Each Disbursement this Period 100.00
City Dover State NH Zip Code 03820	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Ruth Bleyler</b>		<b>Transaction ID: D132783</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 19 Rocky Hill Lane		Amount of Each Disbursement this Period 100.00
City Lyme State NH Zip Code 03768	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Ruth Ginsburg</b>		<b>Transaction ID: D132809</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 6 Dover St.		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Sally Kelly for State Representative</b>		<b>Transaction ID: D132877</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 63 Horse Corner Road		Amount of Each Disbursement this Period 200.00
City Chichester	State NH Zip Code 03258	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sarah Hutz</b>		<b>Transaction ID: D132885</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 1 Mill Street #4020		Amount of Each Disbursement this Period 200.00
City Dover	State NH Zip Code 03820	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Scott Merrick</b>		<b>Transaction ID: D132776</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 27 Blackberry Lane		Amount of Each Disbursement this Period 100.00
City Lancaster	State NH Zip Code 03584	
Purpose of Disbursement Nonfederal Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Sharon Nordgren</b>		<b>Transaction ID: D132784</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address 23 Rope Ferry Road		Amount of Each Disbursement this Period 100.00	
City Hanover State NH Zip Code 03755	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Sid Lovett for State Representative</b>		<b>Transaction ID: D132862</b> Date of Disbursement 10 / 22 / 2006	
Mailing Address P.O. Box 690		Amount of Each Disbursement this Period 200.00	
City Holderness State NH Zip Code 03245	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Stanley 'Butch' Plifka, Jr.</b>		<b>Transaction ID: D132771</b> Date of Disbursement 10 / 20 / 2006	
Mailing Address P.O. Box 459		Amount of Each Disbursement this Period 100.00	
City Winchester State NH Zip Code 03470	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Stephen Shurtleff</b>		<b>Transaction ID: D132836</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 11 Vinton Drive		Amount of Each Disbursement this Period 100.00
City Penacook State NH Zip Code 03303	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Stephen T. DeStefano</b>		<b>Transaction ID: D132847</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 7 Sharon Drive		Amount of Each Disbursement this Period 100.00
City Bow State NH Zip Code 03304	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Sue for Sunapee Campaign</b>		<b>Transaction ID: D132887</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 173 Lake Avenue		Amount of Each Disbursement this Period 200.00
City Sunapee State NH Zip Code 03782	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Susan W. Almy</b>		<b>Transaction ID:</b> D132790 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 266 Poverty Lane 4B		Amount of Each Disbursement this Period 100.00
City Lebanon State NH Zip Code 03766	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Suzanne Beauchesne</b>		<b>Transaction ID:</b> D132878 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 18 Ferry Street		Amount of Each Disbursement this Period 200.00
City Allenstown State NH Zip Code 03275	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Suzanne Butcher</b>		<b>Transaction ID:</b> D132769 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 44 Felt Road		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Suzanne Harvey</b>		<b>Transaction ID: D132810</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 8 Crawford Lane		Amount of Each Disbursement this Period 100.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Sysyn for Representative</b>		<b>Transaction ID: D132868</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 208 Lowell Street		Amount of Each Disbursement this Period 200.00
City Manchester State NH Zip Code 03104	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Tara Reardon</b>		<b>Transaction ID: D132842</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 124 East Side Drive		Amount of Each Disbursement this Period 100.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Terie Norelli</b>		<b>Transaction ID: D132734</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 35 Middle Road		Amount of Each Disbursement this Period 100.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Timothy Robertson</b>		<b>Transaction ID: D132764</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 185 Daniels Hill Road		Amount of Each Disbursement this Period 100.00
City Keene State NH Zip Code 03431	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Tom Buco Campaign Fund</b>		<b>Transaction ID: D132761</b> Date of Disbursement 10 / 20 / 2006
Mailing Address P.O. Box 3149		Amount of Each Disbursement this Period 100.00
City Conway State NH Zip Code 03818	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. Tom Donovan</b>		<b>Transaction ID:</b> D132755 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 165 Mulberry St.		Amount of Each Disbursement this Period 100.00
City Claremont State NH Zip Code 03743	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Trinka Russell</b>		<b>Transaction ID:</b> D132882 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 6
Mailing Address 2 Dundee Circle		Amount of Each Disbursement this Period 200.00
City Stratham State NH Zip Code 03885	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Vincent E. Greco</b>		<b>Transaction ID:</b> D132833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 121		Amount of Each Disbursement this Period 100.00
City Pembroke State NH Zip Code 03275	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. William 'Bill' Butynski</b>		<b>Transaction ID: D132772</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 60 River Road		Amount of Each Disbursement this Period 100.00
City Hinsdale State NH Zip Code 03451	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. William Chase</b>		<b>Transaction ID: D132762</b> Date of Disbursement 10 / 20 / 2006
Mailing Address 173 Spofford Road		Amount of Each Disbursement this Period 100.00
City Westmoreland State NH Zip Code 03467	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. William Hatch</b>		<b>Transaction ID: D132860</b> Date of Disbursement 10 / 22 / 2006
Mailing Address 79 Promenade Street		Amount of Each Disbursement this Period 200.00
City Gorham State NH Zip Code 03581	Purpose of Disbursement Nonfederal Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 161

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
All America PAC

Full Name (Last, First, Middle Initial) <b>A. William V. Knowles</b>		Transaction ID: D132746 Date of Disbursement 10 / 20 / 2006	
Mailing Address 12 Wellington Avenue		Amount of Each Disbursement this Period 100.00	
City Dover State NH Zip Code 03820	Purpose of Disbursement Nonfederal Contribution	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>29185.78</b>